### STATE OF NEW HAMPSHIRE

### 2017 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

### RECEIVED

PLEASE PRINT

NOV 02 2017

I. Name of Lobbyist(s) Dr. Carl	M. Ladd		NEW HAMPSHIRE DEPARTMENT OF STATE		
II. Name of lobbyist's partnersbi	p, firm or corporation, if a	any:			
New Hampshire School Admi	nistrators Association (N	IHSAA)			
	ip, firm or corporation)		<del></del>		
46 Donovan Street, Suite 3	Concord	NH	03301		
Business Address: (Street)	(Town/City)	(State)	(Zip Code)		
(603) <u>225-3230</u> (Telephone)	( 603) <u>225-3225</u> (Fax	e-mail_carl@nh	nsaa.org		
III. This statement covers: (Choo reportable expense transactions v			nay file a separate report for		
✓ All reportable transactions occur	urring in the months prior to	the reporting date relative to t	the following client:		
(Full Name o	of Client as it appears on the Lo	obbyist Registration Form)			
☐ All reportable transactions by the unrelated to any particular client.	e lobbyist (including the lob	obyist's family), or the lobbyin	ng firm listed below which are		
IV. Date of Report April 26, 2 Reports cover: activity from date of	017 🗌 f registration to 3/31/17	July 26, 2017 activity from 4/1/17 to 6/30/1	7		
	5, 2017 <b>\'</b> 1/1/17 to 9/30/17	January 31, 2018 activity from 10/1/17 to 12/3.	1/17		
V. There have been no fees rec If this box is checked, complete just Concord, NH 03301.					
VI. Check if additional reports ar	e attached:				
If you have received fees or ma		file Addendum A- Fees and E	Expenses		
☐ If you have paid an honorarium Expense Reimbursement	or reimbursed expenses, yo	ou must file Addendum B-Re	eport of Honorariums or		
☐ 1f you, your firm, or your family	y has made political contrib	utions, you must file Addend	um C- Political Contributions		
Sworn Statement/Affirmation by I have read RSA 15, RSA 15-B RS and complete to the best of my know (Signature of lobbyist)  Carl M. Ladd	A 14-C and RSA 664 and h	ereby swear or affirm that the	foregoing information is true		
(Print Name of Johnvist)	-				

# PLEASE PRINT

### STATE OF NEW HAMPSHIRE

## Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Dr. Carl M. Ladd				
II. Name of lobbyist's partnership, firm or corporation, if any:  (Name of partnership, firm or corporation)				
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The granded by any expenses:	t relations, or public relations servic			
a) Total of all fees received in this reporting period	a) \$7,588.00			
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y	b) \$3.794.00			
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>11,382.00</u>			
<ul> <li>d) Indicate the amount of any such fees that are due, but have not yet been paid</li> </ul>	d) \$			
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm aggregate total of all expenses paix penses; (b) the aggregate total of a le: meals purchased during a business than \$10 that is given to the person with a value of \$25.00 or less); are pring period of greater than \$25.00 for the of greater than \$25, but not greater than \$56, expense reimbursement, or political			
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$			
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$			
c) Total of all itemized expenditures reported in detail in section VI	c) \$			

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
***************************************	
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
is the and complete the destroying knowledge and control.	1 /
_ all M. Tredd	10/30/17
(Signature of lobby st)	(Date) /
_Carl M_Ladd(Print Name of lobbyist)	

### State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:					
Name of Lobbying part	nership, firm, or corpo	oration:			
Name of Client (leave b	olank if Statement is fo	or the partnership, firm, or	corporation and not related to any		
particular client): New	/ Hampshire School A	Administrators Association	n (NHSAA)		
Date of Report (check o	one):				
April 26, 2017 □	July 26, 2017 🗆	October 25, 2017 🗹	January 31, 2018 □		
			nd Expenses described above, and umber of Addendum forms being		
Addendum A(s	).				
Addendum B(s)	).				
Addendum C(s)	).				
I hereby swear or affirm complete to the best of the less of loobyiet)			at and each Addendum is true and  10/80/17  (Date)		
Carl M. Ladd					
(Print Name of lobbyist	)				